

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/551204

FILED DATE

9.23.05

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3						
4						
5		3				
6		3				
7		3				
8		3				
9		3				
10		3				
11		3				
12		3				
13		3				
14	1		1			
15						
16						
17						
18						
19	1		1			
20						
21						
22						
23				2		
24				2		
25				2		
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50						
TOTAL IND.	3	↓	3	↓		↓
TOTAL DEP.	39	←	50	←		←
TOTAL CLAIMS	42		53			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

Charzitta Burt

BEST AVAILABLE COPY